

**Official**

F.A.O. Group Art Unit 36/62 (4 PAGES inc. this page)

PTO/SB/97 (08-00)  
Approved for use through 10/31/2002, OMB 0851-0031  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE  
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

FAX RECEIVED

DEC 06 2001

## Certificate of Transmission under 37 CFR 1.8

GROUP 3600

I hereby certify that this correspondence is being facsimile transmitted to the  
United States Patent and Trademark Office

on 6 December 2001  
Date



Signature

MARTIN, PHILIP G

Typed or printed name of person signing Certificate

RECEIVED

DEC 19 2001

GROUP 3600

Note: Each paper must have its own certificate of transmission, or this certificate must identify  
each submitted paper.

copy  
of paper  
#2

RECEIVED

DEC 18 2001

Technology Center 2100

Technology Center 2600

DEC 19 2001

RECEIVED

Burden Hour Statement: This form is estimated to take 0.03 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

FAX RECEIVED

Official

DEC 06 2001

Assistant Commissioner for Patents  
Washington, D.C. 20231

GROUP 3600

6, The Manwarings  
Horsmonden  
Kent. TN12 8NQ  
United Kingdom

F.A.O. Group ART UNIT 36/62

Fax 001 703 305 7687

6th December 2001

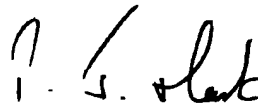
Dear Sir or Madam,

Re: US Patent application Number 09/921,552 filed 08/06/2001  
Philip John MARTIN, Tag and Receiver Systems

I hereby unconditionally withdraw the above US Patent Application. Please ensure that the application does not publish. Please refund as much as possible of the \$1248 total fees paid on the application. I enclose a copy of the fee transmittal and credit card payment forms submitted with the application for your assistance.

Thank you.

Yours faithfully,



Dr Philip J. Martin

RECEIVED  
DEC 19 2001  
Technology Center 2600

Copy of papers for

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Attorney Docket No.	PSM - US
First Inventor	MARGIN, Philip John
Title	AS & RECEIVER SYSTEMS
Express Mail Label No.	

***(Only for new nonprovisional applications under 37 CFR 1.53(b))***

**ADDRESS TO:** Assistant Commissioner for Patents  
Box Patent Application  
Washington, DC 20231

*See MPEP chapter 600 concerning utility patent application contents.*

- Free Transmittal Form (e.g., PTO/SB/17) + 6.6. *Patentist F.R.N.*
1. ☒ *(Submit on original and a duplicate for fee processing)*
2. ☒ Applicant claims small entity status.  
See 37 CFR 1.27.
3. ☒ Specification [ Total Pages 64 ]  
*(Preferred arrangement set forth below)*
- Descriptive title of the invention
  - Cross Reference to Related Applications
  - Statement Regarding Fed sponsored R & D
  - Reference to sequence listing, a table, or a computer program listing appendix
  - Background of the Invention
  - Brief Summary of the invention
  - Brief Description of the Drawings *(if filed)*
  - Detailed Description
  - Claim(s)
  - Abstract of the Disclosure
4. ☒ Drawing(s) (35 U.S.C. 113) [ Total Sheets 14 ]
5. Oath or Declaration [ Total Pages ]
- a. ☒ Newly executed (original or copy)
- b. ☐ Copy from a prior application (37 CFR 1.63 (d))  
*(for continuation/divisional with Box 18 completed)*
- i. ☐ **DELETION OF INVENTOR(S)**  
Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).
6. ☐ Application Data Sheet, See 37 CFR 1.76

7. ☐ CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)
- a. ☐ Computer Readable Form (CRF)
- b. Specification Sequence Listing on:
- i. ☐ CD-ROM or CD-R (2 copies); or
- ii. ☐ paper
- c. ☐ Statements verifying identity of above copies

## ACCOMPANYING APPLICATION PARTS

9. ☐ Assignment Papers (cover sheet & document(s))
10. ☐ 37 CFR 3.73(b) Statement ☐ Power of Attorney  
(when there is an assignee)
11. ☐ English Translation Document (if applicable)
12. ☒ Information Disclosure Statement (IDS)/PTO-1449 ☐ Copies of IDS Citations
13. ☐ Preliminary Amendment
14. ☒ Return Receipt Postcard (MPEP 503)  
(Should be specifically itemized)
15. ☐ Certified Copy of Priority Documents (if foreign priority is claimed)
16. ☐ Nonpublication Request under 35 U.S.C. 122(b)(2)(B)(i). Applicant must attach form PTO/GS-35 or its equivalent.
17. ☐ Other: .....

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No.: \_\_\_\_\_ / \_\_\_\_\_

**Prior application information:**

**Examiner**

**Group Art Unit:**

**For CONTINUATION OR DIVISIONAL APPS only:** The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

## 19. CORRESPONDENCE ADDRESS

☐ Customer Number or Bar Code Label

or ☒ Correspondence address below

Name \_\_\_\_\_

Princip John Darwin

**Address**

## 6. THE HAWKINGS

City

CONFIDENTIAL

**State**

KSNT

**Zip Code**

1212 8NG

Country

U.K.

**Telephone**

44 1892 72417

**Feb.**

Name (Print/Type)

Philip John MARLIN

**Registration No. (Attorney/Agent)**

**Signature**

f. G. rubra

**Date**

1 Aug 2001

**Burden Hour Statement:** This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. **DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO:** Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

PTO-2038 (02-2000)

Approved for use through 01/31/2003. OMB 0651-0043

United States Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**United States Patent & Trademark Office**  
**Credit Card Payment Form**  
**Please Read Instructions before Completing this Form**

**Credit Card Information**

<b>Credit Card Type:</b>	Visa	<u>MasterCard</u>	American Express	Discover
<b>Credit Card Account #:</b>	5434 8011 0453 9495			
<b>Credit Card Expiration Date:</b>	08/02			
<b>Name as it Appears on Credit Card:</b>	DR PHILIP J. P. MARLIN			
<b>Payment Amount: \$(US Dollars):</b>	1248 = 00			
<b>Signature:</b>	P. J. Marlin		<b>Date:</b>	1 Aug 2001

**Refund Policy:** The Office may refund a fee paid by mistake or in excess of that required. A change of purpose after the payment of a fee will not entitle a party to a refund of such fee. The Office will not refund amounts of twenty-five dollars or less unless a refund is specifically requested, and will not notify the payor of such amounts (37 CFR 1.26). Refund of a fee paid by credit card will be via credit to the credit card account.

**Service Charge:** There is a 50.00 service charge for processing each payment refused (including a check returned "unpaid") or charged back by a financial institution (37 CFR 1.21(m)).

**Credit Card Billing Address**

<b>Street Address 1:</b>	6, THE MANWARINGS		
<b>Street Address 2:</b>	HORSMONDEN		
<b>City:</b>	TOWNBRIDGE		
<b>State:</b>	KENT	<b>Zip/Postal Code:</b>	TN12 8NQ
<b>Country:</b>	U.K.		
<b>Daytime Phone #:</b>	44 1892 724194	<b>Fax #:</b>	—

**Request and Payment Information**

**Description of Request and Payment Information:**

BASIC FILING FEE, CLAIMS FEES & IDS. FEE

<u>Patent Fee</u>	Patent Maintenance Fee	Trademark Fee	Other Fee
Application No.	Application No.	Serial No.	IDON Customer No.
Patent No.	Patent No.	Registration No.	
Attorney Docket No.		Identify or Describe Mark	
PJA - US			

If the cardholder includes a credit card number on any form or document other than the Credit Card Payment Form, the United States Patent & Trademark Office will not be liable in the event that the credit card number becomes public knowledge.